



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

MEIR S. SACKS ET AL.

Serial No.: 09/653,794

Filed: September 1, 2000

Group Art Unit: 1615

Examiner: G. Kishore

: COMPOSITIONS AND METHODS
: FOR TREATING SEXUAL
: DYSFUNCTION

: Attorney File No. 286262-00005

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RESPONSE TO RESTRICTION REQUIREMENT

November 18, 2001

Assistant Commissioner for Patents
2900 Crystal Drive
Arlington, VA 22202-3513

Sir:

In response to the Restriction Requirement dated October 18, 2001,
Applicants elect, with traverse, to prosecute Group I (Claims 1-25).

REMARKS

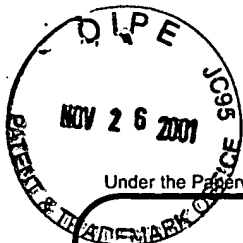
Applicants are in the process of executing Revocation documents and
Power of Attorney documents, authorizing the undersigned to prosecute this application.
The executed documents will be forwarded to the Patent Office under separate cover when
completed.

If it would facilitate prosecution of this application, the Examiner is invited
to telephone the undersigned at (412) 263-4340.

Respectfully submitted,

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644/1615

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/653,794
	Filing Date	09/01/2000
	First Named Inventor	Meir S. Sacks
	Group Art Unit	1615
	Examiner Name	G. Kishore
Total Number of Pages in This Submission	Attorney Docket Number	286262-00005

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ENCLOSURES (check all that apply)		
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<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Alan G. Towner Pietragallo, Bosick & Gordon
Signature	
Date	11/19/2001

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 11/19/2001			
2900 Crystal Drive, Arlington, VA 22202-3513			
Typed or printed name	Alan G. Towner		
Signature		Date	11/19/2001

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